

Carolyn Jones:

Welcome to PNC C-Speak: The Language of Executives. I'm Carolyn Jones, market president and publisher of the Boston Business Journal, alongside my co-host, Saskia Epstein, senior vice President of PNC Bank in New England.

Saskia Epstein:

Thanks, Carolyn. It's great to be with you on C-Speak. Each podcast features local executives sharing insights on their leadership journey, their work and observations in the Boston community.

Carolyn Jones:

Our guest today is Dr. Anne Klibanski, the president and CEO of Mass General Brigham. Dr. Klibanski, welcome to PNC C-Speak. We're so thrilled to have you here with us today.

Anne Klibanski:

Thank you so much for the opportunity. It's a pleasure to be here with you.

Carolyn Jones:

Before we talk about you and your journey, I wonder if we can start by talking a little bit about Mass General Brigham. I wonder if you can give us an overview of the size, the scope, and the mission of the organization.

Anne Klibanski:

Happy to do that. Mass General Brigham is a nationally renowned academic healthcare system. We're anchored by our two academic medical centers, Mass General Hospital and Brigham and Women's Hospital. We have three specialty hospitals, Mass Eye and Ear, McLean, and Spaulding Rehabilitation, a number of community hospitals across New England, Rehabilitation Network, a health insurance plan, a physician network, and many locations for urgents and community care. We are the largest private employer in the state, employing over 82,000 people. We serve 2.6 million patients from 140 different countries. I think one of the important things to emphasize is we are the leading academic research center in the nation. We have over \$2.3 billion in research funding and we receive more NIH funding than any other healthcare system in the world. I would say that as a system, we have an unmatched network of specialists to diagnose, treat, cure diseases many other clinicians and hospitals may have never seen.

We use research to provide cutting edge therapies such as advanced cancer treatments. I think part of that is actually offering access to clinical trials. We offer more than 3,700 ongoing clinical trials. That's to help discover and accelerate new treatments and therapies for our patients. I would say that overall, our singular focus is on making an impact on patients and communities in Massachusetts and across the world. We do that through the treatments and cures, our physicians and physician researchers and how they deliver themselves, companies inspired by our discoveries and outreach to communities that we serve and support. I would also say our community based care is truly core to our mission. Mass General Brigham invests hundreds of millions of dollars to improve health in the communities we serve, and providing accessible, lower cost, innovative community-based care is truly core to our mission.

Saskia Epstein:

Dr. Klibanski, Mass General Brigham, as you've just described, is an impactful and complex organization and the largest employer in the state. Tell us about your leadership style and how you create and sustain culture to attract, retain, and develop talent at that scale.

Anne Klibanski:

My leadership style has evolved over the years. I've always been collaborative. I listen, I want to hear from people who are doing the work. Healthcare has changed at such a dramatic pace over the last number of months, years before the pandemic, certainly after the pandemic, before the latest financial crisis and certainly afterwards. But we are seeing a movement toward healthcare very much focused on patients, which is where healthcare always needs to be focused and redesigning and thinking through a system where the patient is at the center of all that we do. Whether you are a clinician, a researcher, an administrator, an educator, no matter where you are and your role in the hospitals and in our system, you are all dedicated to that.

Carolyn Jones:

Innovation is one of the keys to great leadership. At MGB, you are always changing and innovating operationally as well as in medicine. Can you talk a little bit about what drives that?

Anne Klibanski:

At the heart of innovation, I think, are two things. First are the people, the people who drive innovation, and secondly, it's the environment. How do you create the right environment for innovation to occur? I'd say our people and our longstanding national reputation for research and innovation very much characterizes who we are. Our trainees, our faculty, and our staff often come here to be part of an incredible system with so many people who have spent their careers here dedicated to how to bring the best research and innovation to patients. When it comes to research and research driving innovation, driving change, that part is clearly based on our research program, this distinguishing programs differentiator of research, looking to see how we as a system, as people, as faculty, as researchers, can diagnose the diseases that are often so difficult to diagnose, the people who come to us to figure out what is their disease, what is wrong, what treatments are needed, and that gets also into driving the treatments where treatments are so urgently needed.

That innovation also is very important in bringing new research to patients. Just to give you one recent example in cancer, we performed here a phase one clinical trial, and our researchers found their novel approach to using immunotherapy for glioblastoma, which is a very difficult and challenging cancer to treat, without very clear therapies that work. The approach of using immunotherapy for glioblastomas designed in our laboratories, just in that early study, resulted in an initial dramatic reduction in the tumor size of patients with one patient achieving near tumor regression. Now, that is a early phase study, but again, solid tumors like glioblastomas have been very challenging to treat. The approach our investigators took actually combines two forms of therapy, allowing them to treat glioblastomas in a broader, more effective way.

At Mass General Brigham, we've had more than 300 spinoff health biotech and medical device companies, and they have been created as a result of our research. It's the research that has gone on here for a number of years. If you think about things like patents in the last 15 years, we've probably issued more than 10,000 patents for life-changing technologies and treatments. The other thing I would mention in terms of this excitement around innovation and what drives people here and how deeply embedded it is at Mass General Brigham. We were the lead healthcare system in Massachusetts, successful bid to host ARPA-H. That's the investor catalyst hub. That's a new initiative, a government initiative, which really speaks to funding innovation in a hub and spoke model. We won this with the state in partnership with so many others throughout the state, but it really leverages our deep relationships across the landscape of academic medicine to bring together healthcare institutions, other research entities, investors, government. I think all of this, again, fosters this sense of innovation.

Now, part of your question is also operationally, and that gets me to the second point I made, which is the environment for innovation. How can we make ourselves better operationally? How can we develop those

systems that again, are so patient focused? How do we deal with this incredible capacity challenge in Massachusetts right now where all of healthcare is under such stress where emergency departments have so many patients, in our case, hundreds of patients, to really take the best care of patients. That is often done through operations, and that, I think, again, gets to the broader area of innovation in medicine and defining medicine more broadly to include clinical operations.

Saskia Epstein:

Dr. Klibanski, with so much underfoot and such rapid change happening, and perhaps it doesn't feel rapid leading it, I know that there's a lot of impatience in the care community and the provider community, but talk to us a little bit about what you're most excited about. If you were to have a crystal ball and look forward into the future, what are some of the change underfoot that you're really excited to see rooted and to blossom?

Anne Klibanski:

I think one of the really exciting things that I'm looking at is bringing together the entire system and really think about how we look at our hospitals and put them together in a powerful, patient focused, equitable academic healthcare system and make that a leading healthcare system in the world, taking all of the highest quality research infused care to dramatically improve outcomes and experience. I think one of the things I'm most excited about is how do we set that standard? How do we create it ourselves so that we can lead in this national and beyond challenge to keep the academic mission alive and thriving. For many years, if I look across our system, we were a collection of extremely strong but independent institutions. I think the positive is we have the ingredients, we have these incredible faculty, we have incredible nursing, we have incredible staff, administrators, educators. They're really such incredible people.

But the system, all of these systems are under siege. What I'm excited about right now, and that's why in March we announced that we are combining our academic medical center clinical departments under single chairs and building these patient focused, patient facing, disease focused institutes to really organize the way we deliver care, education, research and support for communities we serve. Unifying these departments will enhance collaboration among outstanding clinicians and researchers and improve patient access and navigation. To make the patient experience as seamless as possible, we're building institutes for disease areas, whether it's cancer, whether it's heart, and coordinating all of this, clinical care, research, education, serving communities. That's really driving what we are doing from bench to bedside out into the community. My vision for the things that I'm excited about, that's one of the things I'm most excited about.

The second is how we think about models of delivering care, how we use digital health, digital capabilities, how we use technology, how we take all of that to best deliver care, not only in our academic medical centers and in our community hospitals, but in the home. Health wellness, illness starts in the home. I think trying to approach patients in the home for preventive care, using technology, keeping people out of the hospital, getting care closer to home and using all the things we have, new models of healthcare delivery, technology to actually enable the use of all of these new modalities. Some of them aren't all that new, some of them. Virtual care, for example, it's been around for many years. It's adopting it. It's making it user-friendly, it's making it successful for patients, for our clinicians so that we can actually deliver the kind of care people need to have in a way that makes sense for the future.

Carolyn Jones:

Let's talk a little bit about our region. Why, from your perspective, is Massachusetts a great place to work, to live, and lead a business, and what do you think needs work and attention?

Anne Klibanski:

I would say that if I look across the state, and I'll start with healthcare, our changing workforce, some of the changes that we see, we have those clinicians who work every day in service to patients. In our organization and many organizations, so many of our clinicians, in fact, all of them have been experiencing significant pressures and challenges over the past several years. That leads to stress, burnout, lack of professional fulfillment. If I look specifically at the state, I would just go back to something that I mentioned before. That's the capacity crisis in Massachusetts. If you look at the data and you look at the capacity challenges, number of beds, the capacity crisis in Massachusetts, the capacity challenges in Massachusetts make us, unfortunately, one of the leading states in the country with capacity challenges. If you look at the number of ambulatory sites or providing care locally closer to home, we are near the bottom of the country in terms of ambulatory sites or outpatient sites to take care of patients.

That difference has driven more and more patients to our hospitals instead of what I'll call the reverse migration, which is moving more and more patients out into community hospitals, into ambulatory settings and into the home. If you look at our healthcare system, I mentioned that we have over 4,000 employees really in the system and it changes all the time. But what's interesting is in contrast to other healthcare systems around the country where you may have a healthcare system that's our size or smaller, it could be half the size, those healthcare systems may have a footprint in multiple states. Whereas if you look at our healthcare system and the other healthcare systems in the state, we are really in Massachusetts. All of our facilities are in Massachusetts, a huge number of our employees, and where they work is right here in Boston.

The reason I'm emphasizing that is it's again, people have to live nearby, particularly if they're working in healthcare, they have to commute. That makes these challenges all the more important. I think again, that is why we are spending so much time and effort as an organization to think about how we bring as employers, new people to come into these roles and also to creating a diverse workforce because again, that is so incredibly important. It's creating the workforce of the future and it has to be creating a workforce that represents our patients, and it's also fostering, encouraging a culture that really is inclusive and equitable.

Saskia Epstein:

Many employers are grappling with changing workforce trends, generational differences, new employee needs. What do you see as the path forward for employers both within your industry and across industries?

Anne Klibanski:

I think all industries are faced with these challenges that you've so clearly outlined. In healthcare, we see so many people around Boston, around Massachusetts, who can actually be part of creating that workforce. That's why I think when we think about these things in the past, we've often thought about recruitment. How do you recruit individuals who are ready to take a position as a physician, as a nurse, as an administrator, as a technician? I think one of the things that I've learned that other healthcare leaders have learned, in fact, that all employers have learned, is you have to start very early in thinking about the workforce of the future. One thing I really wanted to highlight related to this is the Bloomberg Workforce Initiative. We recently announced a partnership with Bloomberg Philanthropies and the Boston Public School System and the city in which about 38 million is being invested, and it's being invested in expanding early college and career connected learning programs for students at the Edward M. Kennedy Academy for Health Careers.

I do see this as a national model of career connected learning. Happily, it's the largest philanthropic investment in the history of the Boston school systems. Boston Public School systems will now benefit as will the city and as will MGB, and most importantly, it's the children. That's all because of this partnership with Bloomberg Philanthropy. The reason I find this really exciting, and we already welcomed the first incoming class of students, this is going to create a brand new curriculum to serve and

connect high school students with career pathways for many in demand fields, whether it's surgery, medical imaging, biotech, medical lab sciences, nursing, emergency services. This will allow the academy to serve about 800 students, and these are students who will grow into these jobs. They will train, we will place them, they will see a future for themselves and for us by being part of this program.

Another thing I just emphasize, because this is specifically related to nursing and nursing is a huge crisis around the country. We recently joined UMass Boston. We announced a \$20 million investment in a nurse training program, and that will help us recruit and retain nurses from underrepresented communities. This is really important because we do have a proven partnership with UMass Boston, which draws from a very diverse pool of students. But what's really exciting about this is it enables us to really find, identify, nurture students who are right here in our own neighborhoods. What we found is that students who participate in this program have about a hundred percent certification rate and a 92% placement rate within our Mass General Brigham hospitals.

I'll just mention one other thing, which is Bunker Hill. Just last month actually, we announced a partnership with Bunker Hill Community Hospital, and that's a grant that again, it empowers people to advance in a medical laboratory career. I think one of the most important lessons for all of our hospitals, all hospitals, no matter where they are, is to think about the local community. Local community can be a city, it can be a region, be a state, but it needs to look first at what are the needs of all of these careers, all of these jobs in the future, and how do we really leverage what we have to create that working force of the future.

Carolyn Jones:

Your vision, really, and the partnerships that you have created are so much of what is making these things happen. C-Speak in general, this podcast that we've done with so many leaders has been described as a masterclass in leadership, and we have learned a tremendous amount from you today about healthcare and that vision and the leadership that you have there. I wonder if we can focus just for a moment on you. Professionally, what motivates you and really what do you attribute your success to?

Anne Klibanski:

I started out in medicine as a clinician, and what motivated me was my interest in taking care of patients. I chose the field of neuroendocrinology early on in my career. It was not a field that was actually well recognized or known. It was bringing together endocrinology, neurology, psychiatry, neurosurgery, a number of fields all related to hormone interactions, the brain, behavior. I found that to be an incredibly exciting area. Clinically, I was so interested in my years at Mass General as a clinician of really putting together multidisciplinary teams to take care of patients.

I think over that singular focus on patients outcomes, and as I became more and more interested in research, I think one of the things that I found so interesting and compelling about research is it enabled you to scale your impact. When I first started doing research as a trainee, it was very interesting to me because I thought, "Here's an opportunity where I can take..." If it's successful, research isn't always successful, "A finding a therapy and not only have an impact on that person sitting right across from me who I am taking care of as a physician, but now there's an opportunity to bring scale to it."

What is going on now or a new discovery, a new treatment and new plan, this can now be broadened to more and more patients. So many of our researchers are also clinicians who actually can bring that research directly to patient care, either directly or indirectly. How do you scale training so that when we talk about the over 3000 trainees who we see every year, they can then become experts in their field. I would say it's patience, it's scale, it's impact because ultimately this is really all about impact. How do you have the most impact? Also, understanding that things do change and you have to have a certain degree of flexibility in your approach and understand that what was true a number of years ago may not be true today or tomorrow.

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Saskia Epstein:

This has been such a fascinating conversation. Thank you. To help our listeners continue to get to know you a little bit, we'd like to close each episode with some rapid fire questions. Are you ready?

Anne Klibanski:

I am ready.

Saskia Epstein:

What are you currently reading or watching-

Anne Klibanski:

Oh.

Saskia Epstein:

Or listening to, I should say. We often hear about excellent audiobooks and podcasts.

Anne Klibanski:

Yes. What I'm reading now is actually rereading *The Periodic Table* by Primo Levi, and so that's one of my favorite books, and two series *The Bear* and *Slow Horses*, both terrific.

Saskia Epstein:

I don't know *Slow Horses*, but *The Bear* is on my list as well.

Anne Klibanski:

Love *Slow Horses*. That's awesome.

Carolyn Jones:

There we go.

Saskia Epstein:

Amazing. I think we might be able to predict the answer to this, but what was your favorite subject in school?

Anne Klibanski:

English literature, without question.

Saskia Epstein:

For some of our listeners, that might be a surprise. I think we got a preview about your career start, but that's fascinating. Have you retained a passion and focus on that?

Anne Klibanski:

Absolutely. I was English literature major in college and chemistry minor, so I was always thinking about the relationship between English literature and chemistry. I suggest people read *The Periodic Table*, that will... Love to read books and love to follow literature, and it's something I really do enjoy doing whenever I have spare time.

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Saskia Epstein:

Speaking of spare time, other than reading, how do you relax, unplug both literally and figuratively?

Anne Klibanski:

That is definitely taking long walks. I really love to walk. I spent a number of years in my life in New York City, where I really mastered the long walks. Long walks in Boston are quite different, and you don't need to go to Central Park to find a place to walk. I would say that long walks definitely is where I turn.

Saskia Epstein:

Speaking of the city, what's a favorite place in Boston?

Anne Klibanski:

There are so many different spots in the city I enjoy going to. If I had to pick one spot that I might call a favorite, it's probably the Charlestown Waterfront. I like that area a lot. I like walking around there. I just like any waterfront area. I find that area to be very peaceful, and interesting, and beautiful.

Saskia Epstein:

Great. Especially in the warmer months, right? As we're watching the sun glisten on the water. It's beautiful.

Anne Klibanski:

Exactly.

Saskia Epstein:

Finally, what's a wish for Boston and for our region?

Anne Klibanski:

I have so many wishes for Boston, and I alluded to some of the things earlier that I think about in terms of transportation and so many other things. But here's a wish. A wish for Boston is to increase education, quality and accessibility, especially in the STEM programs through high school for all students.

Saskia Epstein:

That wraps up another episode. Thank you so much for joining us, Dr. Klibanski, and for sharing your insights.

Anne Klibanski:

Thank you so much. It was a pleasure to talk with you today.

Carolyn Jones:

I'm Carolyn Jones, and this is PNC C-Speak: the Language of Executives. Our guest today was Dr. Anne Klibanski, president and CEO of Mass General Brigham.

Saskia Epstein:

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